

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>9/14/04</u>	2 Serial/Patent # <u>10/613,351</u>		
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/> Petition		<u>10/20/02</u>	\$ 130.00
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 130.00
8 TO BE REFUNDED BY:			
		Treasury Check	
<input checked="" type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:	
<input checked="" type="checkbox"/> Duplicate Payment		9.06--1050	
<input checked="" type="checkbox"/> No Fee Due (Explanation):		<i>Patron grantee</i>	
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>CHARLENE GROUT</u>		TITLE: <u>CLERK</u>	
SIGNATURE: <u>Charlene Grout</u>		PHONE: <u>506-0211</u>	
OFFICE: <u>PTO</u>		*****	
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: <u>Alissa</u>		DATE: <u>9/15/04</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B

09/15/2004  
Name/Number: CHARLENE GROUT  
DAH: 0211  
FC: 9204